



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY
ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED 1/18/14 CD

Complete this report in duplicate at the time of the regular monthly preventative maintenance check, and send copy to Department of Health and Senior Services; retain original in department file.

REVIEWED
By Carol Day at 12:31 pm, Feb 04, 2014

ALCO SENSOR IV SN 030792	PRINTER SN 84.9324.160	DATE OF INSPECTION 1-10-13
LOCATION OF INSTRUMENT (STREET AND CITY) 401 S. Main St. Archie		TIME OF INSPECTION 1319

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

☒ DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)

☒ TEMPERATURE OF ALCO SENSOR (10°C - 40°C) 22°

☒ PRINTER WORKING PROPERLY

☒ TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

☒ SIMULATOR SOLUTION

☐ COMPRESSED ETHANOL-GAS MIXTURE

☒ STANDARD SUPPLIER Guth Labs LOT # 12170 EXP. DATE 9-5-14

☒ SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34° SIMULATOR SN 302779 SIMULATOR EXP DATE 12-17-14

☐ CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)

☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE

☐ 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE

☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 .100

TEST 2 .100

TEST 3 .100

☒ RFI DETECTOR OPERATING

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS	1	(0-.04) 0	(.05-.09) 0	(.10-.14) 1	(.15-.19) 0	(OVER .19) 0
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List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).

INSPECTING OFFICER

SIGNATURE 	PRINT NAME Brian Kocher
TYPE II PERMIT NUMBER/EXPIRATION DATE 220391 / 11-19-14	TELEPHONE NUMBER 816-430-5242

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
2875 James Boulevard
Poplar Bluff, MO 63901



GUTH LABORATORIES, INC.

690 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-664-8470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 12170 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on September 11, 2012, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1215% (w/vol) ethyl alcohol. The expiration date for this lot number is September 5, 2014 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN122211-02 whose values are traceable to NIST.
All balances are calibrated annually by an outside agency using NIST traceable weights.
Calibration verification is done prior to each use utilizing NIST traceable weights.

State of Missouri
DEPARTMENT OF HEALTH



P E R M I T
TYPE II



BRIAN W KOEHN

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER; ALCO-SENSOR IV W/PRINTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 11/19/2012

Number 220391

Expires 11/19/2014

MO 680-0771 (7-88)

Director of State Public Health Laboratory

Director, Department of Health

Lab. 4 (R7-88)

AS IV Serial no: 038792
Version no: 004C

TEST RECORD 00391

Temp Date Time 210L

Air Blank:
01/10/14 13:34 .000
Calibration Check:
24 01/10/14 13:34 .100

Subject Name

Subject I.D.

Operator Name, I.D.

401 S. Main St

Location

AS IV Serial no: 038792
Version no: 004C

TEST RECORD 00390

Temp Date Time 210L

Air Blank:
01/10/14 13:33 .000
Calibration Check:
24 01/10/14 13:33 .100

Subject Name

Subject I.D.

Operator Name, I.D.

401 S. Main St.

Location

AS IV Serial no: 038792
Version no: 004C

TEST RECORD 00389

Temp Date Time 210L

Air Blank:
01/10/14 13:32 .000
Calibration Check:
23 01/10/14 13:32 .100

Subject Name

Subject I.D.

Operator Name, I.D.

401 S. Main St.

Location

RFI

AS IV Serial no: 038792
Version no: 004C

TEST RECORD 00392

Temp Date Time 210L

Void: RFI
12 01/10/14 13:36

Subject Name

Subject I.D.

Operator Name, I.D.

401 S. Main St.

Location